Preliminary Report of the Sub-Committee on the Educational Qualifications of Adult Health Educators*

IN times past, public health agencies were almost wholly concerned with the prevention and control of communicable diseases. The greatest accomplishments have been made in the control of certain diseases by legislative enactment, enforcement of regulations, and supervision. This is particularly the case with those bacterial diseases which are spread by indirect contact infection, as in water, milk, food, and by insects. Water purification, sewage treatment and disposal, pasteurization, food inspection and control, drainage, and so forth, have eliminated or minimized the dangers in our country of those parasitic diseases which made up the formidable epidemics and pandemics.

As a result of the great accomplishments of public health in prevention and control of communicable diseases, the new public health is becoming more interested in personal hygiene, including such health factors as periodic health examinations; the prevention, early detection, and correction of body-mind-emotional defects including the defects which are prone to come on during the various age periods of life, including degenerative diseases and cancer; nutrition; mental hygiene; ventilation; and other factors which may be specified. Obviously, we cannot set up laws, establish mechanisms, and employ experts to deal adequately with the several factors which are included in physiologic hygiene. Progress and achievement in physiologic hygiene can be brought about only by means of popular health education. This is also true, in a very large measure, of our efforts to deal with those diseases which are spread by direct contact infection.

Thus, it is seen that the education of the masses in the fundamentals of public health has become one of the outstanding interests and activities of the modern public health movement. We must now begin to look at the public health educator as one of the most important functionaries in modern public health and look to his education and qualifications in the same way in which we do the education of other types of public health personnel.

RECOMMENDATIONS

The Sub-Committee on the Educational Qualifications of Health Educators (Adult Health Educator-Popular Health Educator) of the Committee on Professional Education, after consultation with a number of recognized leaders in the field of popular or public health education, submits this report. The report should serve as a *guide* to young men or women who are

* The Committee on Professional Education of the American Public Health Association publishes this Report of the Sub-Committee to permit the members and Fellows of the American Public Health Association to review it and to offer criticisms and suggestions to the Committee in the further consideration of the report.

looking forward to this important and promising field of public health as careers.

The professional education of the public health educator falls into 3 general groups of studies: (1) Scientific Education, (2) Methods and Materials in Public Health Education and Publicity, (3) Practical Field Work Experience.

1. *Scientific Education*—All public health interests and activities center in the human body and its welfare. Obviously, in order for the public health educator to function adequately in popular health education, he should possess a substantial education in those sciences which acquaint him with the make-up or structure, the workings or functions, and the care of the human body as a whole. A working knowledge of these sciences adds immeasurably to the effectiveness of the public health educator, and enables him to realize the relative values and social significance of disorders toward which health education is directed.

Human anatomy, both gross and microscopic, including embryology and genetics, acquaints one with the structure and development of the body. A knowledge of physiology, biochemistry, and psychology is essential in order to understand the function, growth, and development of the body as a whole. To know how to take care of the human body, one must be familiar with those sciences which give him knowledge of the nature and causes of morbid processes; namely, bacteriology and pathology. One must have had also some substantial courses in hygiene, public health, and preventive medicine including the fundamentals of physiologic hygiene, community hygiene and epidemiology, and public health administration in general.

2. *Methods and Materials in Public Health Education and Publicity*—The technic of public health adult education differs from that of school health education in several respects. For the latter, courses in the history, philosophy, psychology, principles and practices of public school education are recommended and prescribed in order to make a genuine school man or woman out of the prospective school health educator and in order for him or her to qualify for certification. While some knowledge of the principles and practices of education is desirable and essential for the public health educator, the sub-committee does not feel that it is essential at this time to prescribe as extensive a study of those educational courses specified for the school health educator. It is of the opinion, however, that the public health educator should have had some substantial courses in the philosophy and psychology of public school education and of adult education. Assuredly, he should possess a working knowledge of the philosophy and psychology of education as these are applied to adult education. Methods and Materials in Adult Health Education should be familiar to him. Almost daily, new studies and contributions are being made to this subject. In addition to these important basic subjects which acquaint one with the educational aspects of public, popular, or adult education, the special technics of adult health education should be given due consideration in the professional education of the public health educator. These are: public speaking; journalism; feature writing; community newspaper; radio and visual education, including placards, posters, stereopticon, and cinema; demonstration, including exhibits, fairs; perhaps some instruction in the psychology of writing and advertising.

3. *Practical Field Experience*—The sub-committee is of the opinion that

at least 3 months of supervised practical experience in a public health department or agency in which recognized public health education is being effectively carried on should be stipulated for the public health educator of the future.

The extent of study of all the courses stipulated above and their contents need not be put down in this report. The contents of courses in anatomy, physiology, psychology, biochemistry, bacteriology, and pathology are fairly well determined. Whether the contents of these courses as now being prescribed for medical students, should be taken by students going into the several fields of public health work for which preparation in medicine is not a requisite, is a matter that will be taken care of in the future. Perhaps, for the present, special courses can be arranged for students in public health. It is anticipated and recommended that all the courses advised: in the sciences, in education, and in methods and materials in public health education, including those subjects which acquaint one with the several avenues of public education, be given as comprehensively and substantially as possible.

In view of the interest expressed by those from whom opinions have been sought relative to the formulation of this report, in the contents of courses recommended in hygiene and public health, the suggested make-up of physiologic hygiene, community hygiene, and public health administration are herewith stipulated:

1. *Physiologic Hygiene*—Physiologic, personal, or individual hygiene should include due consideration of the following factors: (1) Air—modern conception of ventilation including shelter —housing, clothing; (2) Water—physiologic and daily hygiene needs; (3) Nutrition—the balanced diet, as measured in terms of proteins, carbohydrates, fats; vitamins and minerals; (4) Light—illumination, ultra-violet rays; (5) Body poisons—bacterial poisons, drugs, chemicals—industrial hygiene; (6) Mental hygiene and the social and economic factors involved in body-mind-emotional disorders; (7) Mechanical world—with particular reference to violence, injury, accidents; (8) Periodic health examinations; (9) Nature—early detection, correction or control of body-mind-emotional defects which are prone to come on during the several age periods of life; (10) Special physiology and hygiene of the several systems in the body including the sense organs and sex physiology and hygiene; (11) Physiology and hygiene of exercise; and (12) Rest, sleep, and avoidance of fatigue.

In the study of these factors which make up physiologic hygiene, the relative values of each for the various age groups should be emphasized. Differentiation should be made between those factors based on scientific experimentation and observation and those which are based largely on opinion or empiricism. Fads and frauds are common in respect to several of these factors. Therefore, they should be given due consideration in the course in order that the public will be told about them later on. The rôle that the home, school, and community should play in the comprehensive and constructive program of physiologic hygiene should be clearly brought out in the courses.

2. *Community Hygiene* — One's knowledge of the principles and practices of community hygiene must be built on a course in general bacteriology and should be gained in the pursual of a general course in communicable diseases and epidemiology which includes the following topics:

(1) Nature and classification of parasites responsible for communicable diseases; (2) Source of communicable diseases—man and animal; (3) Principles and practices of direct and indirect contact infection; (4) Classification of parasitic diseases according to discharges; (5) Routes over which communicable diseases or parasitic diseases are disseminated; (6) General methods for blocking these routes, including water purification, sewage and refuse treatment and disposal, food and milk control, and eradication of disease conveying insects; (7) Specific procedures for blocking certain communicable diseases, including the classification and use of biologics; (8) Epidemiological procedures.

3. *Public Health Administration*—Certainly one who anticipates a career in health education, whether public school health education or adult public health education—popular health instruction—should possess a working knowledge of public health administration or applied hygiene; the principles and practices of physiologic hygiene and of community hygiene as applied to a community as a whole or to maternity and infancy, to children (including school health work) and to adults (including industrial hygiene). The special interests and activities and personnel of a public health department, including public health statistics, sanitation, epidemiology, laboratories, public health nursing, and so on, should be familiar to one who anticipates a career in adult health education. Some field observation and work is highly recommended.

PROGRAM OF STUDY

Following the general procedure of the Committee on Professional Education of the American Public Health Association, to recommend professional educational qualifications for personnel in several fields of public health on as high a level as possible with a view of meeting the future needs as it sees the problem, and with a view of serving as a guide for those who anticipate careers in public health education, the following program of study is recommended:

1. *Undergraduate Work*—The college work should be on a broad cultural basis. Substantial courses in English and particularly in composition and writing; public speaking; philosophy; biology; chemistry; psychology; sociology; and government should be completed. During the upper-classmen years, such subjects as the philosophy and psychology of public school education and of adult education should be included. There should be a thorough preparation for graduate work, but this need not be done in a manner to sacrifice the broad cultural interests in education.

2. *Graduate Work*—The admission requirements to the program of study in public health education should be graduation from a recognized college. The under-graduate work should include those courses prescribed. The degree of Master of Science in Public Health or Public Health Education, or its equivalent such as the certificate, should be conferred upon the satisfactory completion of the following curriculum and after the successful completion of the practical field experience. Of course, it is understood that this program of study will be subject to much modification in view of the fact that students will enter it with considerable variation in the previous college education. For example, those going into this field from the medical profession will already have completed the health-medical sciences and, as a rule, will be deficient in the educational courses.

The courses recommended in this

program of study in public health education offered as graduate work include:

1. Anatomy—Gross, Microscopic—Embryology
2. Physiology, including Biological Chemistry
3. Pathology
4. Physiologic Hygiene
5. Community Hygiene
6. Public Health Administration, including Public Health Statistics

The other subjects prescribed in the graduate school should include certain courses which acquaint one with the technic of adult health education; namely:

1. Philosophy and Psychology of Adult Education
2. Methods and Materials in Adult Health Education
3. Feature Writing
4. Advanced Public Speaking
5. Community Newspaper
6. The Significance of Demonstration and Fairs in Public Education
7. Cinema and Radio in Adult Education
8. Psychology of Advertising — Posters, Placards, etc.

After the completion of this curriculum, 3 months of directed practical work in public health education in a recognized health department or agency should be required before the Master's degree or certificate is prescribed.

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